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CONFIRMATION NO. 1662

SERIAL NUMBER 10/796,906	FILING DATE 03/08/2004 RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. ICT/US-49
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APPLICANTS

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 ** CONTINUING DATA ***** *yes - RDR*

This application is a CON of 10/161,107 05/30/2002 PAT 6,702,842
 which is a CON of 09/607,799 06/30/2000 PAT 6,464,716
 which is a CIP of 09/570,075 05/12/2000 PAT 6,471,717
 and is a CIP of 09/215,041 12/16/1998 PAT 6,254,626
 and is a CIP of 09/103,342 06/23/1998 PAT 6,096,068 -
 and is a CIP of 09/052,545 03/31/1998 PAT 6,231,595
 and said 09/103,342 06/23/1998
 is a CIP of 09/047,012 03/24/1998 PAT 5,957,963
 which is a CIP of 09/012,287 01/23/1998 PAT 6,051,019

 ** FOREIGN APPLICATIONS ***** *none - RDR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Roy D. Jackson</i>	Initials		

ADDRESS

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TITLE

Selective organ cooling apparatus and method

<p>FILING FEE</p> <p>RECEIVED</p> <p>900</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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